

TRAVEL AUTHORIZATION

Traveler's Name: _____ Univ. ID#: _____ UNGC EMPLOYEE? Yes No Telephone No: _____ Date Filed: _____

Address Code & Address: _____ you a student? Yes No Citizens/Status _____ Country _____ Vis. Type: _____
 US Citizen Resident Alien Non-Resident Alien

Destination: _____ Purpose: (DO NOT ABBREVIATE) _____ Estimated Cost of Trip: (NO MORE THAN EST. REIM) _____

FILL OUT THIS SECTION!

Period Covered by this Voucher

Leave Date: _____ Time Left: _____ Return Date: _____ Time Returned: _____

I understand that any advance made by the University is a loan and that I am personally responsible for all monies advanced to me. If a travel advance is obtained and the trip for which the advance is made is not taken, I agree to repay the advance immediately. I understand that I have up to ten days following completion of the trip to repay or substantiate the advance by completing and submitting this form with the required original receipts. In the event I fail to repay the advance, I agree that the University may deduct the amount of the advance from the next salary check due to me.

I approve this travel, including the amount to be advanced; I approve lodging, registration fee and meals (for out of country travel only) in excess of the allowed rate, use of personal vehicle and /or airport parking for the trip described above as a necessary University expense.

(Cross out any above phrases that are not approved)

NO

NO

Traveler's Signature _____ Date _____ Supervisor / Authorizing Signature(s) _____ Date _____

TRAVEL ADVANCE / COSTS PAID IN ADVANCE OF TRIP

Fund: _____

Travel Advance Requested: \$ _____

*(Loan to Traveler)

FUND number for costs paid in advance: _____

Travel Costs Paid by the University in advance of the trip (attach invoice)

Air	Registration	Other
\$ _____	\$ _____	\$ _____

(223010, 223020, 223030)(234510, 234520, 234530)

NO

DOCUMENT NUMBER: _____

MULTIPLE:

VENDOR NUMBER: _____

Document #: _____

Bank _____ CM _____ Due Date: _____

REIMBURSEMENT OF EXPENSES PAID BY TRAVELER

	Out-of-Country	Non-Employee
Air Transportation (attach receipt unless paid in advance)	223030	223220
Bus/Rail Transportation	223060	223220
Mileage X \$ _____	223060	223220
Rental Car / Taxi: (attach receipt)	223060	223220
Subsistence:		
Hotel _____ nights @ _____ (receipt required)	223120	223130 223320
Breakfast _____ meals @ _____		
Lunch _____ meals @ _____		
Dinner _____ meals @ _____		
Total Meals = _____		
Other:		
Registration (attach receipt/proof of payment unless paid in advance)	234510	234520 234530 223320
Other (attach explanation or use back of form)	223170	223180 223190 223320

COA	Index/Fund Number(s):	Fund Initials	Amount Reimbursed
G			\$ _____
			\$ _____
			\$ _____

Total Expenses to be Reimbursed: _____

Entertainment (attach receipt & on reverse side of receipt describe who was entertained & business purpose of entertainment) _____

Less Cash Advance Received: (_____)

Total Due Traveler / (UNCG): _____

Total Amount Reimbursed: _____

Non-State Acct to Charge for entertainment: _____ - 221322

Entertainment Fund Holder Initials _____

If you are receiving funding from your department or some other source, they will fill out these portions of the TRV after they have finished, submit all of your paperwork to the GSA for a final once over.

If you are not receiving funding from any source other than the GSA, simply fill out the top portion of the TRV, sign the bottom signature line, and submit the TRV with your receipts to the GSA.

Under penalties of perjury, I certify that this is a true and accurate statement of my citizenship and of the lodging, expenses and other amounts incurred in the services of the State.

I have examined this reimbursement request and certify that it is just, necessary and reasonable, and in compliance with University policies.

Traveler's Signature _____ Date _____ Supervisor's Signature _____ Date _____

SIGN HERE!